Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a falid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docker Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OR SMALL EN NI **SMALL ENTITY** (Column 1) (Column 2) RATE FEE NUMBER FILED NUMBER EXTRA FEE RATE FOR BASIC FEE OR (37 CFR 1.16(a)) TOTAL CLAIMS OR minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAIMS X \$ = OR minus 3 =(37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR + \$ = OR TOTAL **TOTAL** \* If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 3) SMALL ENTITY (Column 2) SMALL ENTITY (Column 1) **CLAIMS** HIGHEST **PRESENT** ADDI-ADDI-RATE NUMBER RATE REMAINING **TIONAL** EXTRA TIONAL **PREVIOUSLY** AFTER AMENDMENT FEE FEE/ **AMENDMENT** PAID FOR Minus Total (37 CFR 1.16(c)) X \$ OR Minus Independent (37 CFR 1.16(b)) X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) **OR** = **TOTAL** TOTAL OR ADD'L FEE ADD'L FEE (Column 3) (Column 2) (Column 1) **HIGHEST CLAIMS**  $\mathbf{\omega}$ **PRESENT RATE** ADDI-ADDI-REMAINING NUMBER RATE TIONAL **EXTRA** TIONAL AFTER **PREVIOUSLY** ENDMENT FEE FEE PAID FOR **AMENDMENT** Minus Total X \$ X \$ OR (37 CFR 1.16(c)) Ξ Independent Minus (37 CFR 1.16(b)) X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 3) (Column 2) (Column 1) HIGHEST **CLAIMS**  $\circ$ **PRESENT** RATE ADDI-**RATE** ADDI-NUMBER REMAINING **TIONAL EXTRA** ENDMENT TIONAL **PREVIOUSLY AFTER** FEE FEE PAID FOR **AMENDMENT** = Minus Total X \$ OR (37 CFR 1.16(c)) \*\*\* = Independent Minus = (37 CFR 1.16(b)) X \$ OR A FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ +\$ = **TOTAL** TOTAL ADD'L FEE OR ADD'L FEE \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.